"FORM D

MALUALLY EXECUTED U.S. SECURITIES AND EXCHANGE COMMISSIO

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB NUMBER: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response . . 16.00

	SEC	USE	ONLY
Prefix			(Serial

DATE RECEIVED

l		

Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
CMG CAPITAL LP			i i Q G			
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505	Rule 506 Section 4(6)	ULOE			
Type of Filing: New Filing	Amendment					
		IFICATION DATA				
Enter the information requested about the	issuer					
Name of Issuer (check if this is an amen	dment and name has changed, and indicat	e change.)				
CMG CAPITAL LP		03028	3513			
Address of Executive Offices	1	(Number and Street, City, State, Zip Code)	Telephone Number			
c/o CGM Advisors, Inc., 123 West Wayne A	venue, Radnor, PA 19087		(Including Area Code) (610) 989-9090			
Address of Principal Business Operations	1	(Number and Street, City, State, Zip Code)	Telephone Number			
(if different from Executive Offices)			(Including Area Code)			
			()			
Brief Description of Business						
Securities Investment			DOCCESSED			
Type of Business Organization			PROGRAM			
corporation	limited partnership, already formed	other (please specify):	0 1 2002			
business trust	limited partnership, to be formed		JUL 3 1 2003			
Actual or Estimated Date of Incorporation or	Month Year Organization: [0 1] [0 2]	Actual	Estimated THOMSON FINANCIAL			
Jurisdiction of Incorporation or Organization	: (Enter two-letter U.S. Postal Service abb CN for Canada; FN for other f					
GENERAL INSTRUCTIONS						
Federal: Who Must File: All issuers making an offering	ng of securities in reliance on an exemptio	n under Regulation D or Section 4(6), 17 CFR 230.5	01 et seq. or 15 U.S.C. 77d(6).			

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	į	,			
ı a					
		A. BASIC IDEN	NTIFICATION DATA		
2. Enter the informati	on requested for the	following:			
Each prom	oter of the issuer, if	the issuer has been organized wit	hin the past five years;		
Each honor	inial aumor having	iho movimu to vioto an diamoso, an d	inset the rote or disposition of 10	0/ ar more of a close of	aguita agguitia af tha iassau
Each belief	iciai owner naving	the power to vote or dispose, or u	irect the vote or disposition of, 10	76 OF THOSE OF A CIASS OF	equity securities of the issuer,
• Each execu	tive officer and dire	ector of corporate issuers and of co	orporate general and managing pa	rtners of partnership iss	uers; and
• Each gener	al and managing pa	rtner of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General Partner
Full Name (Last name first, if	individual)		·		
CMG Advisors, Inc.					
Business or Residence Address	s (Number and Str	eet, City, State, Zip Code)			
123 West Wayne Avenue, Rad	nor, PA 19087				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				<u> </u>
Blumenthal, Stephen B.	!				
Business or Residence Address	(Number and Stre	eet, City, State, Zip Code)			
c/o CMG Advisors, Inc., 123 V	Vest Wayne Avenue	e, Radnor, PA 19087			
Check Box(es) that Apply:	Investment Advisor	Beneficial Owner	Principal	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
CMG Advisors, L.P.					
Business or Residence Address	(Number and Stre	eet, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
123 West Wayne Avenue, Rad	nor, PA 19087				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
					Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			

Principal

Director

General and/or
Managing Partner

Check Box(es) that Apply:

Full Name (Last name first, if individual)

☐ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Beneficial Owner

				·										
				Į.	В. І	NFORM	IATION	ABOUT	OFFE	RING				V N-
1.									Yes No					
				: : :	Answe	er also in A	ppendix, C	olumn 2, if	filing under	r ULOE.				
2.	What is													*\$500,000
		* The G	eneral Partr	ner may wa	ive minimu	m in its sol	e discretion							
3.	Does the	offering :	narmit ini-t	oumerch:-	of a cinala	unit?								Yes No ⊠ □
					_									
4.	solicitati dealer re	ion of purc gistered w	hasers in co	onnection v Cand/or wit	vith sales of th a state or	securities states, list	in the offeri the name of	ing. If a pe f the broker	rson to be li or dealer.	isted is an a If more tha	ssociated p	erson or ag	nilar remun ent of a brol e listed are a	ker or
Full Nan	ne (Last na	me first, if	individual))						·			*****	 .
Business	or Resider	nce Addres	ss (Number	and Street,	City, State	, Zip Code)	•							
Name of	Associated	Broker o	r Dealer			<u></u>	**				• • • • • • • • • • • • • • • • • • • •			
States in	Which Per	son Listed	Has Solicit	ted or Inten	ds to Solici	t Purchaser	S							
(Check														All States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam			individual)		[17]	[01]	[41]	[YA]	[WA]	[4,4]	[44.1]	[17.1]	[I K]	
				1										
Business	or Residen	ce Addres	s (Number	and Street,	City, State,	Zip Code)								
Name of	Associated	Broker or	Dealer											
				i										
States in	Which Pers	son Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	s							
(Check '	'All States'	or check	individual	States)										All States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
Full Name	[RI] e (Last nan	[SC] ne first, if	[SD] individual)	[ŢN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
	,	-,												
Business	or Residen	ce Address	(Number a	and Street,	City, State,	Zip Code)								
														··········
Name of	Associated	Broker or	Dealer									-	_	
States in \	Which Pers	on Listed	Has Solicite	ed or Intend	is to Solicit	Purchasers	;							
(Check "	All States"	or check	individual S	States)										All States
\ 	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL] [MT] [RI]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

11160746 01

-	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEED	S
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	C	\$
	Equity	\$ \$	\$
	Common Preferred	Ψ	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Limited Partnership Interests *	\$ <u>500,000,000</u>	\$ 24,106,722
	Total*	\$500,000,000	\$ 24,106,722
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	30	\$ 24,106,722
	Non-accredited Investors	n/a	\$n/a
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505	·	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ 0
	Printing and Engraving Costs		\$ 0
	Legal Fees		\$ 35,000
	Accounting Fees		\$ 0
	Engineering Fees		\$ 0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify) Miscellaneous (blue, sky fees, duplicating, courier, etc.)		\$ 5,000
	Total		\$ 40,000

^{*} This is a continuous offering. Therefore, the aggregate offering price could be greater than or less than this amount.

	C. OFFERING	PRICE, NUMBE	R OF INVESTOR	S, EXPENSES	AND USE C	F PROCEEDS	
	b. Enter the difference between Question 1 and total expensis the "adjusted gross proce	ses furnished in re-	sponse to Part C - Q	uestion 4.a. This	difference		* \$ <u>499,960,000</u>
5.	Indicate below the amount be used for each of the purp an estimate and check the b must equal the adjusted gro 4.b above.	of the adjusted gro coses shown. If the ox to the left of the	ess proceeds to the interest amount for any pure estimate. The total	ssuer used or prop prose is not know al of the payment	posed to vn, furnish s listed		
	1.0 400 00.	1 1 1				Payments to Officers, Directors, &	Payments To
	Calculation and Case					Affiliates	Others
	Salaries and fees	i				□ \$	□ \$
	Purchase of real estate	T. Control of the Con				<u></u> \$	
	Purchase, rental or leasing a					□ \$	\$
	Construction or leasing of p					□ \$	□ \$
	Acquisition of other busines that may be used in exchange	ge for the assets or	securities of anothe	er issuer pursuant	to a		□ \$
	merger)					□ \$	
	Repayment of indebtedness	t and the second				□ \$	□ \$
	Working capital	1				□ \$	□ \$
	Other (specify): to be used a Memorandum					□ \$	□ \$
	Column Totals					□ \$ □ \$	
	Total Payments Listed (colu	1					99,960,000
			D. FEDERAL SIG	'N' A T'I IDE	····		
			D. FEDERAL SIC	MATURE			
followin	ner has duly caused this noticing signature constitutes an upof its staff, the information fu	ndertaking by the	issuer to furnish	to the U.S. Secu	rities and E	xchange Comm	ission, upon writter
Issuer (Pri	nt or Type)	i I	Signature			Date	
	PITAL LP	i !	Size			30	by 29, 2003
Name of S	igner (Print or Type)	!	Title of Signer (Print of	or Type)			
Stephen	B. Blumenthal		President of CGM	Advisors, Inc., (General Part	ner	
* See	asterisked comment on p.4.						